Statement Concerning Your Employment in a Job Not Covered by Social Security

Employee Name:	Employee ID #
Employer Name:	Employer ID#
Your earnings from this job are not covered under Social Security. When you retire, or if you become disabled, you may receive a pension based on earnings from this job. If you do, and you are also entitled to a benefit from Social Security based on either your own work or the work of your husband or wife, or former husband or wife, your pension may affect the amount of the Social Security benefit you receive. Your Medicare benefits, however, will not be affected. Under the Social Security law, there are two ways your Social Security benefit amount may be affected.*	
Windfall Elimination Provision	
when you are also entitled to a pension from a job where you did Social Security benefit than if you were not entitled to a pension to monthly reduction in your Social Security benefit as a result of the	from this job. For example, if you are age 62 in 2005, the maximum
be offset if you also receive a Federal, State or local government The offset reduces the amount of your Social Security spouse or very For example, if you get a monthly pension of \$600 based on earn amount, \$400, is used to offset your Social Security spouse or with will receive \$100 per month from Social Security, \$500 - \$400 =	ings that are not covered under Social Security, two-thirds of that dow(er) benefit. If you are eligible for a \$500 widow(er) benefit, you
For More Information	
Social Security publications and additional information, including www.socialsecurity.gov. You may also call toll free 1-800-772-1325-0778, or contact your local Social Security office.	g information about exceptions to each provision, are available at 213, or, for the deaf or hard of hearing, call the TTY number 1-800-
I certify that I have received Form SSA-1945 that contains in Windfall Elimination Provision and the Government Pension Security benefits.	
Signature of Employee	Date
Form SSA-1945 (11-2004) (Expires January, 2006)	
* Please check with your personnel office as your position may n	ot be covered for Medicare benefits.
FOR EMPLOYER USE ONLY:	
Payroll Class Code: Where to send: If Class Code B, V or D, send to the E If Class Code E, K, or N, retain at emp	